

E. E.O. FORM

**Please complete this form and return to the Community Development
office at your earliest convenience:**

**City of Cincinnati
Department of Community Development, Suite 700
805 Central Avenue
Cincinnati, OH 45202-1947**

The _____
(Name of your Business District)

Tax Exempt Number _____

**Please indicate the current composition of your
Neighborhood Business District's Board:**

Number of Males _____

Number of Females _____

TOTAL _____

Number of Caucasians _____

Number of African Americans _____

Number of Hispanics _____

Number of Asian/Pacific Islanders _____

Number of Other _____

TOTAL _____

THANK YOU FOR YOUR COOPERATION!